ISDH Annual Fiscal Report of a Nonprofit Acute Care Hospital

# **Hospital: Community Hospital of Munster**

Year: 2003 City: Munster Peer Group: Large

**Statement One: Summary of Revenue and Expenses** 

1. Gross Patient Service Revenue				
Inpatient Patient Service Revenue	\$272,234,115			
Outpatient Patient Service Revenue	\$184,423,806			
Total Gross Patient Service Revenue	\$456,657,921			
2. Deductions from Ro	evenue			
Contractual Allowances	\$216,643,991			
Other Deductions	\$1,156,891			
Total Deductions	\$217,800,883			
3. Total Operating Revenue				
Net Patient Service Revenue	\$238,857,038			
Other Operating Revenue	\$7,406,778			

4. Operating Expenses				
Salaries and Wages	\$102,498,575			
Employee Benefits and Taxes	\$25,877,594			
Depreciation and Amortization	\$16,517,165			
Interest Expenses	\$455,305			
Bad Debt	\$8,959,799			
Other Expenses	\$81,191,539			
Total Operating Expenses	\$235,499,977			
5. Net Revenue and Exp	enses			
Net Operating Revenue over Expenses	\$10,763,838			
Net Non-operating Gains over Losses	\$0			
Total Net Gain over Loss	\$10,763,838			

Total Operating Revenue	\$246,263,815

6. Assets and Li	abilities
Total Assets	\$192,753,416
Total Liabilities	\$36,755,680

Statement Two: Contractual Allowances						
Revenue Source	Gross Patient Revenue	Contractual Allowances	Net Patient Service Revenue			
Medicare	\$212,701,982	\$122,768,659	\$89,933,323			
Medicaid	\$25,060,208	\$18,136,808	\$6,923,400			
Other State	\$0	\$0	\$0			
Local Government	\$0	\$0	\$0			
Commercial Insurance	\$128,894,730	\$75,738,524	\$143,157,206			
Total	\$456,657,920	\$216,643,991	\$240,013,929			

Statement Three: Unique Specialized Hospital Funds						
Fund Category	Estimated Incoming Revenue from Others	Estimated Outgoing Expenses to Others	Net Dollar Gain or Loss after Adjustment			
Donations	\$0	\$95,228	(\$95,228)			

),337)
\$0

Number of individuals estimated by this hospital that are involv	ed in education
Number of Medical Professionals Trained In This Hospital	5,001
Number of Hospital Patients Educated In This Hospital	3,354
Number of Citizens Exposed to Health Education Message	108,198

#### Statement Four Annual Summarized Community Benefit Statement on Nonprofit Hospital

This hospital is a nonprofit organization and files an annual community benefit statement with the Department under Indiana Code 16-21-9. Each nonprofit hospital must confirm its mission statement, document the number of persons and dollars allocated under its adopted charity care policy, and describe the progress of the community to achieve specific objectives set by the hospital.

Cou	ınty	Lake	Community	Lake County
Loca	ation		Served	

#### **Hospital Mission Statement**

The Community Hospital is dedicated to the well being of the community and to proving the highest quality medical care at the lowest possible cost.

Unique Services		Type of Initiatives		Document Available	
Medical Research NO		Disease Detection	YES	Community Plan	YES

Community Education YES Clinic Support YES Needs Asse	ssment	1995

#### Allocation of Dollars and Persons Served under Adopted Charity Policy

Most nonprofit hospitals adopt a charity benefit policy to serve the medically indigent. On an annual basis, the hospital will confirm the eligibility and set aside dollars to ensure low-income persons can be offered needed inpatient and outpatient hospital services.

	2001	2002	2003
Persons served in last twelve months	317	628	663
Charity Care Allocation	(\$906,122)	(\$963,014)	(\$1,073,919)

#### Hospital Community Benefit Projects and the Projects' Net Cost

On an annual basis, all nonprofit hospitals will report on the progress that the local community has made in reducing the incidence of disease and improving the delivery of health services in the community.

Name of Program and Description of Progress Made in Achieving Annual Objectives	Net Costs of Programs
Cancer Program	(\$46,486)
Heart Disease Program	(\$32,756)
Health and Wellness	(\$328,581)
Maternal and Child Care	(\$38,479)

Other Programs	(\$565,198)

## Summary of Unreimbursed Costs of Charity Care, Government Funded Programs, and Community Benefits

Based on uniform definitions of costs, each nonprofit hospital must identify the costs of serving its community that are not reimbursed by government and other third party payers.

Specialized Programs	Unreimbursed Costs
1. Total unreimbursed costs of providing care to patients	(\$2,082,449)
unable to pay, to patients covered under government funded programs, and for medical education, training.	
2. Community Health Education	(\$283,713)
3. Community Programs and Services	(\$149,573)
4. Other Unreimbursed Costs	(\$122,813)
5. Total Costs of Providing Community Benefits	(\$2,638,548)

# **Identification of Additional Non-Hospital Charity Costs**

In addition, some hospitals will have non-hospital organizations under its ISDH license are providing community benefits in this fiscal year.

Organization Providing Charity Care	Net Costs of Care
None	\$0

### For further information on these initiatives, contact:

Hospital Representative: John C. Gorski

Telephone number: 219/836-1600

Web Address Information: www.comhs.org/community

# ISDH STATISTICAL COMPARISON BETWEEN THIS HOSPITAL AND OTHER HOSPITALS IN ITS PEER GROUP

PERFORMANCE INDICATOR	METHODOLOGY	THIS HOSPITAL'S RESULTS	PEER GROUP AVERAGE
1. # of FTE's	Number of Full Time Equivalents	2,249	2,212
2. % of Salary	Salary Expenses divided by Total Expenses	43.5%	37.8%
3. Average Daily Census	Patient Days divided by annual days (365 days)	279.3	237.6
4. Average Length of Stay	Number of Patient Days divided by the Number of Discharges	4.6	5.1
5. Price for Medical/Surgical per stay	Total Medical/Surgical charges divided by Medical/Surgical discharges	\$2,383	\$3,042

6. Gross Price per Discharge	Gross Inpatient Revenue divided by the Total Discharges	\$12,256	\$17,323
7. Outpatient Revenue Percentage	Outpatient Revenue divided by the Gross Total Revenue	40.4%	40.9%
8. Gross Price per Visit	Gross Outpatient Revenue divided by the Total Outpatient Visits	\$821	\$1,022
9. % of Medicare	Medicare Revenue divided by the Gross Patient Revenue	46.6%	37.8%
10. % of Bad Debt	Bad Debt Expense divided by the Gross Operating Expenses	3.8%	4.9%
11. Charity Allocation	Unreimbursed costs of providing services to patients under adopted charity policy	(\$2,082,449)	(\$10,021,313)
12. Net Margin	Excess of Revenue over Expenses divided by the Total Operating Revenue	4.4	4.3

### Notes:

- 1. NR = Not Reported
- 2. See Statewide Results for definitions of terms.